



For more information:  
Carpenter Center, 116 Terry Blvd  
Gering, NE 69341  
Phone: 308-635-8422  
E-mail: [info@carpentercenter.us](mailto:info@carpentercenter.us)  
[carpentercenter.net](http://carpentercenter.net)

# Gymnastics Registration Form

## Beginner Class

Participant's Name \_\_\_\_\_

Birthdate \_\_\_\_\_ Current Grade \_\_\_\_\_ Years of Experience \_\_\_\_\_

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ E-mail \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Alternate Cell \_\_\_\_\_ Work Phone \_\_\_\_\_

Previous Tumbling, Cheerleading, Gymnastics, Dance: \_\_\_\_\_

In case of an emergency other than the parent to be notified is:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone: \_\_\_\_\_

Special Medical/Medication Conditions \_\_\_\_\_

Insurance Information / Group Name \_\_\_\_\_

Policy Holder \_\_\_\_\_

**(Please Turn Over)**

## Beginner's Gymnastics Class

### Information:

**Saturday: 9:00 AM-10:00 AM**

**for ages 4-6**

**10:00 AM-11:00 AM**

**for ages 7+**

**Fees: \$45/ Month**

**\$20 Registration Fee**



### Ask About Financial Aid

Payment: Cash \_\_\_\_\_ Check # \_\_\_\_\_

Credit Card \_\_\_\_\_

Received by \_\_\_\_\_

Fin Aid Requested Y N

Fin Aid Application completed Y N

Prorated for month of \_\_\_\_\_ Amt\$ \_\_\_\_\_

**Child's Behavior-** I understand I am responsible for my child's, siblings', and family member's behavior and safety while at the Carpenter Center premises, including parking lot, bathrooms, lobby, etc. I also understand that I am responsible for cleaning up after my child.

**Tuition-** I understand tuition is **due on the 28th prior to the month of participation**. Families with additional kids receive a \$5.00 discount for each child. There will be an additional charge of \$30.00 for NSF checks.

**Registration and Fee -Fees MUST BE PAID on date of enrollment** with a complete application.

**Refunds- There are no refunds, credits, or prorating of fees for missed days, holidays, class withdrawal, or dismissal. New enrollees can have the first month prorated but must pay the prorated amount plus the upcoming month in full.**

**Waiver:** Participation in physical activities involves certain risks, strains, exhaustion, joint injury, etc. The Carpenter Center will not be liable for lost or stolen items while program participants are using the community center facilities. I give my permission for the Carpenter Center, without obligation, to use any photographs, film footage, or tape recordings which may include my voice/image or that of my child for purposes of promoting the Carpenter Center programs. I, the undersigned, for myself and my heirs, do hereby release the Carpenter Center/Housing Authority of Western Nebraska/City of Terrytown and its employees, agents, volunteers, and coaches from any and all claims for injury, death, loss, or damage. I/my child may suffer as a result of my participation. Upon registering your child, there are no refunds.

Parent or Guardian Signature

\_\_\_\_\_

Date

\_\_\_\_\_

